

**2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000061539

**FILED  
Sep 26, 2011  
Secretary of State**

**Entity Name:** COHEN COMMERCIAL MANAGEMENT, LLC

**Current Principal Place of Business:**

5041 OKEECHOBEE BOULEVARD  
WEST PALM BEACH, FL 33417

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 223244  
WEST PALM BEACH, FL 33422

**New Mailing Address:**

**FEI Number:** 76-0837680      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COHEN, FRED C  
712 U.S. HIGHWAY ONE, SUITE 400  
NORTH PALM BEACH, FL 33408 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: FRED C COHEN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: COHEN, BRYAN  
Address: 712 U.S. HIGHWAY ONE, SUITE 400  
City-St-Zip: NORTH PALM BEACH, FL 33408

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRYAN S COHEN

MGRM

09/26/2011

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Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date